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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

Declaration Submitted With Initial Filing

OR

Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number	91830.0542088
First Named Inventor	Walzer et al.
COMPLETE IF KNOWN	
Application Number	10/595,999
Filing Date	May 24, 2006
Art Unit	TBA
Examiner Name	TBA

I hereby declare that:

Each inventor's residence, mailing address, and citizenship are as stated below next to their name.

I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

BISBENZAMIDINES FOR THE TREATMENT OF PNEUMONIA

(Title of the Invention)

the specification of which

is attached hereto

OR

was filed on (MM/DD/YYYY) 05/24/2006 as United States Application Number or PCT International

Application Number 10/595,999 and was amended on (MM/DD/YYYY) (if applicable).

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PCT/US04/04468	PCT	11/24/2004	<input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

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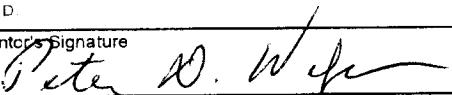
City	State	ZIP
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Country	Telephone	Email
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NAME OF SOLE OR FIRST INVENTOR:	<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle [if any]) Peter D.	Family Name or Surname Walzer		
Inventor's Signature 	Date 7/19/07		
Residence: City Loveland	State Ohio	Country USA	Citizenship United States
Mailing Address 6778 Little River Lane			
City Loveland	State Ohio	Zip 45140	Country USA

Additional inventors or a legal representative are being named on the 2 supplemental sheet(s) PTO/SB/02A or 02LR attached hereto.

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DECLARATION**ADDITIONAL INVENTOR(S)**

Supplemental Sheet

Page 1 of 2

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Melanie T.		Cushion	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
City	State	Zip	Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Annie		Mayence	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
City	State	Zip	Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Tien Liang		Huang	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
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Jean Jacques		Vanden Eynde	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
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Address				
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Given Name (first and middle [if any]) Peter D.		Family Name or Surname Walzer	
Inventor's Signature			Date
Residence: City	State	Country	Citizenship
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Melanie T	Cushion		
Inventor's Signature			Date <u>8-2-07</u>
Miami Township Residence City	Ohio State	USA Country	United States Citizenship
6/57 Little River Lane			
Mailing Address			
Miami Township City	Ohio State	45140 Zip	USA Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
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Annie	Mayence		
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Mons Residence City	State	Belgium Country	Belgium Citizenship
53 Blvd. Albert-Elisabeth			
Mailing Address			
Mons City	State	B-7000 Zip	Belgium Country
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Tien Liang	Huang		
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Melanie Residence City	Louisiana State	USA Country	United States Citizenship
573 Aris Avenue			
Mailing Address			
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Melanie T.		Cushion	
Inventor's Signature			
Miami Township Residence: City	Ohio State	USA Country	United States Citizenship
6757 Little River Lane			
Mailing Address			
Miami Township City	Ohio State	45140 Zip	USA Country
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Annie		Mayence	
Inventor's Signature	08/11/2007 Date		
Mons Residence: City	State	Belgium Country	Belgium Citizenship
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Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature			Date
Residence: City	State	Country	Citizenship
Mailing Address			
City	State	Zip	Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature			Date
Residence: City	State	Country	Citizenship
Mailing Address			
City	State	Zip	Country

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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

Declaration Submitted With Initial Filing

OR

Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number	91830.0542088
First Named Inventor	Walzer et al.
<i>COMPLETE IF KNOWN</i>	
Application Number	10/595,999
Filing Date	May 24, 2006
Art Unit	TBA
Examiner Name	TBA

I hereby declare that:

Each inventor's residence, mailing address, and citizenship are as stated below next to their name.

I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

BISBENZAMIDINES FOR THE TREATMENT OF PNEUMONIA

(Title of the Invention)

the specification of which

is attached hereto

OR

was filed on (MM/DD/YYYY) 05/24/2006 as United States Application Number or PCT International

Application Number 10/595,999 and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES	Certified Copy Attached? NO
PCT/US04/04468	PCT	11/24/2004	<input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]

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DECLARATION — Utility or Design Patent Application

Direct all correspondence to:	<input checked="" type="checkbox"/> The address associated with Customer Number: 26874	OR <input type="checkbox"/> Correspondence address below
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Address		
City	State	ZIP
Country	Telephone	Email

WARNING:

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR:	<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle [if any]) Peter D.	Family Name or Surname Walzer		
Inventor's Signature	Date		
Residence: City	State	Country	Citizenship
Mailing Address			
City	State	Zip	Country
<input checked="" type="checkbox"/> Additional inventors or a legal representative are being named on the		supplemental sheet(s) PTO/SB/02A or 02LR attached hereto.	

ADDITIONAL INVENTOR(S)

Supplemental Sheet

Page 1 of 2

DECLARATION

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Melanie T.		Cushion	
Inventor's Signature			Date
Miami Township Residence: City	Ohio State	USA Country	United States Citizenship
6757 Little River Lane			
Mailing Address			
Miami Township City	Ohio State	45140 Zip	USA Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Annie		Mayance	
Inventor's Signature			Date
Mons Residence: City	State	Belgium Country	Belgium Citizenship
53 Blvd. Albert-Elisabeth			
Mailing Address			
Mons City	State	B-7000 Zip	Belgium Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Tien Liang		Huang	
Inventor's Signature			Aug 9, 2007 Date
Melanie Residence: City	Louisiana State	USA Country	United States Citizenship
573 Aris Avenue			
Mailing Address			
Melanie City	Louisiana State	70005 Zip	USA Country

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DECLARATION**ADDITIONAL INVENTOR(S)
Supplemental Sheet**

Page 2 of 2

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Jean Jacques		Vanden Eynde	
Inventor's Signature			Date
Residence: City	State	Country	Citizenship
Mailing Address			
City	State	Zip	Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
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Declaration Submitted With Initial Filing

OR

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Attorney Docket Number	91830.0542088
First Named Inventor	Walzer et al.
<i>COMPLETE IF KNOWN</i>	
Application Number	10/595,999
Filing Date	May 24, 2006
Art Unit	TBA
Examiner Name	TBA

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(Title of the Invention)

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Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
PCT/US04/04468	PCT	11/24/2004	<input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

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Name

Address

City

State

ZIP

Country

Telephone

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NAME OF SOLE OR FIRST INVENTOR:	<input type="checkbox"/> A petition has been filed for this unsigned inventor
--	---

Given Name (first and middle [if any])	Family Name or Surname
--	------------------------

Peter D.	Walzer
----------	--------

Inventor's Signature	Date
----------------------	------

Residence: City	State	Country	Citizenship
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Mailing Address			
-----------------	--	--	--

City	State	Zip	Country
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<input checked="" type="checkbox"/>	Additional inventors or a legal representative are being named on the supplemental sheet(s) PTO/SB/02A or 02LR attached hereto.
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DECLARATION**ADDITIONAL INVENTOR(S)
Supplemental Sheet**

Page 1 of 2

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Melanie T.		Cushion	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
City	State	Zip	Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Annie		Mayence	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
City	State	Zip	Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Tien Liang		Huang	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
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DECLARATION**ADDITIONAL INVENTOR(S)
Supplemental Sheet**Page 2 of 2

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Jean Jacques		Vanden Eynde	
Inventor's Signature 		02/11/2007 Date	
Mons Residence: City	State	Belgium Country	Belgium Citizenship
53 Blvd. Albert-Elisabeth Mailing Address			
Mons City	State	B-7000 Zip	Belgium Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
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